	4		·					· : <u>(</u>	770	40	1704	<u></u>
Application or Docket Number												
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/840 985												82
CLAIMS AS FILED - PART I (Column 1) (Column 2)									MITY	OR	OTHER	
TOTAL CLAIMS			17					ATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355,00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			17 minus 20=		. 3		X	5 9 =		OR	X\$18a	
INDEPENDENT CLAIMS			minus 3 =		С		×	40=	/	OR	X80=	,
MU	RTIPLE DEPEN	DENT CLAIM P	RESENT					35=	/		+270=	
* If the difference in column 1 is less than zero, enter *O* in column 2								TAL	//	OR	TOTAL	
CLAIMS AS AMENDED - PART II								TAL	<u>; </u>	JOH	OTHER	THAN
		(Column 1)		(Colur	nn 2)	(Cotumn 3)	SM	ALL	ENTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HEGH NUM PRIEVIX PAID	BER DUSLY	PRESENT ' EXTRA	R	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 17	Minus	. 6	20	•	X	9=		ОЯ	X\$18=	
AMENDMENT	Independent	• 1	Minus	***	3	a	X	10=		OB	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	MBONE	CLAIM			35=		OR	+270=	
				,				OYAL	2		YOYAL	· -
1	4/05 (Column 1) (Column 2) (Column 3)						ADDI	r. F ee			adoit. Fee	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	EST BER DUSLY	PRESENT EXTRA	R	ŤΕ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 17	Minus	- 2	0	=	X	9=		OR	X\$18=	
	Independent	• 1	Minus		3	=	×	10=		OЯ	X80=	
C.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35-		OR	+270=	
								OTAL T. FEE		OR	TOTAL ADDIT, FEE	
210 5 (Column 1) (Column 2) (Column 3)												
ENTC		REMAUNING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	R	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.17	Minus	. ()	90	= — — — — —	X	9=		OR	X\$18=	·
E E	Independent	•	Minus	2		• —	X4	10=		OR	X80=	
		NTATION OF M					+1	35-		OR	+270=	
* If the entry in column 1 is loss than the entry in column 2, write "V" in column 3. **If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 3, enter "3."												
•••	'll the "Highest Nu. The "Highest Nur	mber Proviously P ber Previously Pa	aid For IN THI id For (Total o	is space independ	edi ei (brei	n 3, enter "3." Highest numbe	r tound in	the ap	propriete bo	x in co	lumn 1.	

FORM PTO-676 (Rev. 800)

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